Cambridge Public Library Literacy Project

Central Square Branch 45 Pearl Street Cambridge, MA 02139 617-349-4013

Thank you for your interest in volunteering. The energy and dedication of our volunteers allow us to run 18 ESL conversation classes per week at 4 different branches, 3 levels of computer classes, 2 hours of drop in resume writing and job hunting support, and approximately 50 tutor/student pairs.

In order to continue the success of our program, we ask prospective volunteers to consider whether they are able to commit to volunteering at least 2 hours per week for 6 months.

If you are able to make this commitment, and would like to apply to become a volunteer, please fill out the attached application and send it to the Literacy Coordinator via email or regular mail. Should our needs match your skills and availability you will be contacted to arrange for an interview.

Again, thank you for your interest in serving the Cambridge community.

Maria Balestrieri Literacy Coordinator 617.349.4013 mbalestrieri@cambridgema.gov

Literacy Project Volunteer Application

Cambridge Public Library Literacy Project Central Square Branch 45 Pearl Street Cambridge, MA 02139 617-349-4013

Date		
Name		-
Address: City,		=
State, Zip		
E-mail address		
Telephone (home, work, cell)		1
Which is the best way to reach you?		
Emergency Contact Name and number		
How did you hear about the	is program?	
Why are you interested in v	olunteering?	

Please explain why you think you would make a good volunteer and what relevant skills you
possess.
What times of the week are you available for volunteering?
How long of a commitment are you able to make?
0414124111
Other thoughts you'd like to share:
Completing this application process does not guarantee that a volunteer opportunity in the Literacy
Project will be available for you.

Please attach a recent resume to this application

Steps to Volunteering at the Cambridge Public Library Literacy Project: □ Complete the Literacy Project Application □ Submit a complete resume (attached to application) □ Complete the City of Cambridge Application for Employment □ Meet with Literacy Project Coordinator and Branch Manager □ Come for an observation of activities you might consider doing □ Complete the CORI application with Assistant Director for Human Resources

Contact information:

Maria Balestrieri

Literacy Coordinator
45 Pearl Street
Cambridge MA 02139
617-349-4013
mbalestrieri@cambridgema.gov

☐ Read and sign the Volunteer Agreement Form

Main Library Cambridge Public Library 449 Broadway Cambridge MA 02139 617-349-4032

Jason Yee

Branch Manager 45 Pearl Street Cambridge MA 02139 617-349-4417 jyee@cambridgema.gov

Volunteer Agreement Form

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- I agree to conduct myself in a courteous and professional manner as a volunteer and representative of the Cambridge Public Library Literacy Project.
- I agree that my services are provided on a volunteer basis without pay or compensation of any kind and all services are to be performed at my own risk.
- I understand that a CORI check will be conducted before I can begin volunteering.
- I agree to treat students of the Literacy Project with respect.
- I understand that any personal knowledge gained about students will be considered confidential.
- I understand that in the absence of the Literacy Coordinator I should seek guidance first from the branch manager (Sarah Moser) or in her absence other library staff and will defer to their judgment.
- I understand that at times I may open and close the Literacy Center.
- I accept the responsibility for ensuring:
 - o when I close the Literacy Room, the lights will be closed and the door locked behind me.
 - o I will call 911 when necessary.
 - o I will monitor the space and make sure it's being used only by volunteers and students.
- I understand that my weekly time commitment is to be taken very seriously. I will make every effort to hold that time inviolable and will work to schedule all other commitments around it with the understanding that students will be expecting me to be there.
- I understand that I will receive on-going supervision from the Project Coordinator. I understand that the Project Coordinator will help me address any concerns or needs that may arise.
- I am able to commit at least 6 months to this volunteer project.
- I hereby allow CPL to use any photographs taken of me on library property or at a special event for public relations purposes <u>unless stipulated below</u>.

I have read and agree with the above guidelines.

Comments:

Name	Date